## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

017750-507

CLAIMS AS FILED - PART I (Column 1) (Column 2)						mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ì	BASIC FEE	370.00	OR.	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		*			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			minus 3 =		* <i>\oldoy</i>		ı	X42=		OR	X84=	0
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	0
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	L	TOTAL		OR	TOTAL	158
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1) CLAIMS	•	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	Ī	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JUIPLE DEF	PENDENT	CLAIM		Ī	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colun	on 2)	(Column 3)	Α	DDIT. FEE			ADDIT. FEE	
_		CLAIMS		HIGH	EST		Г	-	ADDI-		-	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIC PAID I	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	Ī	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MU	JETIPLE DEF	PENDENT	CLAIM		l	+140=		OR	+280=	
							L	TOTAL		L	TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
		(Column 1) CLAIMS		(Colun		(Column 3)	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ľ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	┟	X42=			X84=	
[	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7.42-		OR	704-	
	f the entry in anti-	mn 1 in lass that the	o onto in acti	mn O walke	"O" :!		L	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE												
		nber Previously Pai					r four	nd in the app	ropriate box	in col	umn 1.	